




## UNITED STATES PATENT AND TRADEMARK OFFICE

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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/672,843	<b>FILING DATE</b> 09/28/2000 <b>RULE</b> -	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 14127.0001U1
<b>APPLICANTS</b> Lee G. Dante, Merrion Station, PA ;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CON OF 08/755,795 08/28/1996 PAT 5,856,332 WHICH IS A DIV OF 08/560,820 11/20/1995 PAT 5,817,665 WHICH IS A DIV OF 08/031,096 03/02/1993 PAT 5,512,593				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 10/24/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> -	<b>TOTAL CLAIMS</b> 25  <b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b>  23859				
<b>TITLE</b> Method for treating emotional or mental illness and emotional or mental illness concomitant with seizures				
<b>FILING FEE RECEIVED</b> 1014	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: 		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	